

HAWAII STATE ETHICS COMMISSION 1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809

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STATE OF HAWA! STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly) PARTI LOBBYIST (First) NAME(Last) (Middle) TELEPHONE 536-2351 Perreira Randolph MAILING ADDRESS (Street) FAX 523-6859 888 Mililani St. #601 (City) (State) (Zip Code) Honolulu, HI 96813 EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) TELEPHONE Hawaii Government Employees Association 536-2351 MAILING ADDRESS (Street) FAX 523-6859 888 Mililani St. #601 (City) (Zip Code) (State) 96813 Honolulu, ΗI

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Hawaii Government E	Imployees Association	536-2351
MAILING ADDRESS (Street)		FAX
888 Mililani St. #6	523-6859	
(City)	(State)	(Zip Code)
Honolulu, HI 96813		96813
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE TELEPHONE
Tracy Chang		536-2351
MAILING ADDRESS (Street)	, , , ,	FAX
888 Mililani St. #6	501	523-6859
(City)	(State)	(Zip Code)
Honolulu, HI		96813

CERTIFICATION OF LOBBYIST

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY				
	Agriculture	Education	Human Services	Science, Technology & Economic Development
	Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations, international Affairs	Tourism & Recreation
	Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	Transportation
	Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	Other: (indicate below)
	Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections	

hereby certify that the information furnished above is	s, to the best of my knowledge, correct and complete. (-3/-05			
(Signature of Lobbyist)	(Date)			
PART V AUTHORIZATION TO LOBBY				
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED			
Randolph P. Perreira	Executive Deputy Director			
NAME OF ORGANIZATION (if applicable)	TELEPHONE			
Hawaii Government Employees Associat	ion 536-2351			
MAILING ADDRESS (Street)	FAX			
888 Mililani St. #601	523-6859			
(City) (State)	(Zip Code)			
Honolulu, HI	96813			
I hereby authorize the above named person to engage in lobbying activities on behalf of the undersigned.				
Rep 1. 1/2	1-31-05			
/ (Signature of Authorizing Officer or Person Represer	ited) (Date)			